

**Department of Public Health and Social Services
Division of Environmental Health
Food Establishment Inspection Report**

Page 1 of 4

INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME
Regular		<input checked="" type="checkbox"/>	<u>3</u>	<u>05/03/18</u>	<u>MCDONALDS OF Y160</u>
Follow-up				TIME IN	TIME OUT
Complaint	<input checked="" type="checkbox"/>		RATING	<u>10:02 am</u>	<u>12:30 am</u>
Investigation			<u>A</u>	SANITARY PERMIT NO.	LOCATION (Address)
Other:				<u>170000955</u>	<u>W1 7011-1-10 MOBIL GAS STATION</u> <u>Y160 GUAM</u>
ESTABLISHMENT TYPE			AREA	TELEPHONE	No. of Risk Factor/Intervention Violations
<u>RESTAURANT</u>			<u>1</u>	<u>653-6555</u>	<u>0</u>
No. of Repeat Risk Factor/Intervention Violations					RISK CATEGORY
<u>N/A</u>					<u>3</u>

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Supervision						
1	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			6
Employee Health						
2	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Management awareness; policy present			6
3	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Proper use of reporting, restriction & exclusion			6
Good Hygienic Practices						
4	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Proper eating, tasting, drinking, betelnut, or tobacco use	6
5	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	No discharge from eyes, nose, and mouth	6
Preventing Contamination by Hands						
6	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Hands clean and properly washed	6
7	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed	6
8	<input checked="" type="radio"/> IN	<input type="radio"/> OUT			Adequate handwashing facilities supplied & accessible	6
Approved Source						
9	<input checked="" type="radio"/> IN	<input type="radio"/> OUT			Food obtained from approved source	6
10	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Food received at proper temperature	6
11	<input checked="" type="radio"/> IN	<input type="radio"/> OUT			Food in good condition, safe, and unadulterated	6
12	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Required records available: shellstock tags, parasite destruction	6
Protection from Contamination						
13	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A		Food separated and protected	6
14	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input checked="" type="checkbox"/>	Food contact surfaces: cleaned & sanitized	6
15	<input checked="" type="radio"/> IN	<input type="radio"/> OUT			Proper disposition of returned, previously served, reconditioned, and unsafe food	6
Potentially Hazardous Food (TCS Food)						
16	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Proper cooking time and temperatures	6
17	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Proper reheating procedures for hot holding	6
18	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Proper cooling time and temperatures	6
19	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Proper hot holding temperatures	6
20	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A		Proper cold holding temperatures	6
21	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A	<input type="radio"/> N/O	Proper date marking and disposition	6
Consumer Advisory						
22	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A		Consumer Advisory provided for raw or undercooked foods	6
Highly Susceptible Populations						
23	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A		Pasteurized foods used; prohibited foods not offered	6
Chemical						
24	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A		Food additives: approved and properly used	6
25	<input checked="" type="radio"/> IN	<input type="radio"/> OUT			Toxic substances properly identified, stored, used	6
Conformance with Approved Procedures						
26	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	N/A		Compliance with variance, specialized process, and HACCP plan	6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box: If numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Safe Food and Water						
27		Pasteurized eggs used where required				1
28		Water and ice from approved source				2
29		Variance obtained for specialized processing methods				1
Food Temperature Control						
30		Proper cooling methods used; adequate equipment for temperature control				1
31		Plant food properly cooked for hot holding				1
32		Approved thawing methods used				1
33		Thermometer provided and accurate				1
Food Identification						
34		Food properly labeled; original container				1
Prevention of Food Contamination						
35	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present				2
36	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage & display	<input checked="" type="checkbox"/>			1
37		Personal cleanliness				1
38	<input checked="" type="checkbox"/>	Wiping cloths: properly used and stored	<input checked="" type="checkbox"/>			1
39		Washing fruits and vegetables				1
I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.						
Person in Charge (Print and Sign)						Date:
<u>MERILYN A. ENCLIO</u>						<u>5/3/18</u>
DEH Inspector (Print and Sign)						Follow-up (Circle one):
<u>T. CHIMEN</u>						<u>YES</u> NO
						Follow-up Date
						<u>6/3/18</u>

Food Establishment Inspection Report

Page 2 of 4

ESTABLISHMENT NAME MCDONALDS OF YIGO		LOCATION (Address)	
INSPECTION DATE 05/03/18	SANITARY PERMIT NO. 700000955	PERMIT HOLDER	

TEMPERATURE OBSERVATIONS

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
SAUSAGE BURRITO/CHILLER	39	CUT LETTUCE/PEAR CHILLER	40.5
HAM/CHILLER	34	CHICKEN STRIPS/WALK IN	42.5
CUT ONIONS/SERVICE LINE	46.5	CANADIAN BACON/WALK-IN	32.0
COOKED BACON/SERVICE LINE	74.5		
CUT LETTUCE/SERVICE LINE CHILLER	40		
COOKED RICE/RICE COOKER	164.5		
COOKED SAUSAGE/SERVICE WARMER	165		
COOKED CHORIZO/SERVICE WARMER	155		

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
----------	-------------------------------------	-----------------

Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	A REGULAR INSPECTION WAS CONDUCTED ON THIS DAY IN RESPONSE TO COMPLAINT NO. 18-050A REGARDING A CUSTOMER SEEING A LIVE ROACH ON THE COUNTER. NO EVIDENCE TO SUPPORT THIS COMPLAINT WAS FOUND AT TIME OF INSPECTION. THE PREVIOUS INSPECTION WAS DATED 11/16/12 10/A.	
	THE FOLLOWING VIOLATIONS WERE OBSERVED:	
14	OBSERVED A CUTTING BOARD WITH DISCOLORATION AND DEEP SEAMS THROUGHOUT. ALL FOOD CONTACT SURFACES SHALL BE SMOOTH AND EASILY CLEANABLE TO ENSURE PROPER CLEANING AND TO PREVENT CROSS CONTAMINATION. - COS; CUTTING BOARD REPLACED WITH A NEW ONE.	COS
20	MULTIPLE PHE/TCS FOODS ON SERVICE LINE HELD ABOVE 41°F. ALL PHE/TCS FOOD SHALL BE HELD AT 41°F AND BELOW TO PREVENT BACTERIAL GROWTH. - COS; FOOD WAS DISCARDED	COS

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) MERLIN A. LUCIO / [Signature]	Date: 5/3/18
DEH Inspector (Print and Sign) J. LUIZ B. BOWI / [Signature] T. SHIMIZU / [Signature]	Date: 5/3/18

Food Establishment Inspection Report

Page 3 of 4

ESTABLISHMENT NAME MCDONALD'S OF Y160		LOCATION (Address) LOT 7011-1-10 MOBIL GAS STATION Y160 GUAM
INSPECTION DATE 5/3/2018	SANITARY PERMIT NO. 170000955	PERMIT HOLDER JCA GUAM LLC

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
----------	-------------------------------------	-----------------

Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

35	MULTIPLE FLIES SEEN IN THE KITCHEN AREA. PRESENCE OF PESTS SHALL BE PREVENTED TO PREVENT CONTAMINATION.	6/3/18
36	OBSERVED ONIONS STORED NEAR GARBAGE AND CLEANING CHEMICALS. ALL FOOD ITEMS SHALL BE STORED PROPERLY TO PREVENT CROSS CONTAMINATION. COS: ONIONS REMOVED AND STORED PROPERLY	COS
38	WIPING CLOTHS NOT STORED IN SANITIZING SOLUTION. WIPING CLOTHS SHALL BE STORED IN SANITIZING SOLUTION WHEN NOT IN USE TO PREVENT CROSS-CONTAMINATION. COS: WIPING CLOTHS REPLACED AND STORED PROPERLY.	COS
40	RICE SOAP STORED INSIDE RICE COOKER IN CONTACT WITH RICE. IN-USE UTENSILS SHALL BE STORED PROPERLY TO PREVENT CROSS-CONTAMINATION. COS: RICE SOAP CHANGED, RICE DISCARDED.	COS
51	GARBAGE BIN OVERFLOWING AND STORED NEAR SINGLE SERVICE ITEMS. GARBAGE SHALL BE PROPERLY DISPOSED AND STORED TO PREVENT CROSS CONTAMINATION. COS: GARBAGE DISPOSED AND RELOCATED.	COS
52	OBSERVED BAREWOOD SHELVING FOR SINGLE SERVICE MENU IN STORAGE. PHYSICAL FACILITIES SHALL BE EASILY CLEANABLE AND NON ABSORBENT FOR PROPER CLEANING	6/3/18

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

Person in Charge (Print and Sign) MERLIN M. ENCY/2mmunio	Date: 5/3/18
DEH Inspector (Print and Sign) T. SHIMIZU EPHO I / JCRUZ EPHO I	Date: 5/4/18

LOT 7011-1-10 MOBIL GAS STATION, Y150 GUAM

PERMIT HOLDER
JCA GUAM LLC

**CORRECT
BY DATE**

PHOTOS WERE TAKEN.

"A" PLACARD NO. 01801 REMOVED.

"A" PLACARD NO 02647 ISSUED.

BRIEFED PIC ON ABOVE.

In Charge (Print and Sign) MEZURIA A. ELICW / Zmm.

Date: 5/3/18

EH Inspector (Print and Sign) T. Shimizu, EPH I J. Cruz EPH I

Date: 11/3/18